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7A31
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FAX MESSAGE

Send To:

Name: Examiner Beth Stephan

FAX Number: (703) 308-3691

Firm: US Patent & Trademark Office

Telephone Number: (703) 308-2485

GROUP 3600

From:

Name James L Reed

Floor: 4

Operator Sending:

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Comments:

EXPEDITE TO EXAMINER BETH STEPHAN
EXAMINER HAS FILE IN HER OFFICE

re: US Appln Serial No. 09/374,598
Attorney Docket No 044696-5007

PATENT
ATTORNEY DOCKET NO.: 044696-5007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Reissue Application of:
Jan Hendrik Mensen

U.S. Patent No.: 5,657,600
Issued August 19, 1997

Reissue Application Serial No.: 09/374,598

Filed: August 13, 1999

For: **WEB MEMBER FOR CONCRETE
FORM WALLS**

Commissioner for Patents
Washington, D.C. 20231

Sir:

Examiner: Stephan, B.

Art Unit: 3635

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AMENDMENT AND RESPONSE TRANSMITTAL FORM

1. Transmitted herewith is an Amendment in response to the Office Action mailed August 31, 2001. Applicant respectfully requests reconsideration of the subject application in view of the attached amendment and remarks.

2. Additional papers enclosed:

- ☐ Drawings: ☐ Formal ☐ Informal (Correction)
- ☐ Information Disclosure Statement
- ☐ Form PTO-1449, _____ references included
- ☐ Citations
- ☐ Declaration of Biological Deposit
- ☐ Submission of "Sequence Listing", computer readable copy and/or amendment pertaining thereto for biotechnology invention containing nucleotide and/or amino acid sequence.

3. Extension of Time

The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136(a) apply.

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- ☐ Applicants believe that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicants have inadvertently overlooked the need for a petition and fee for extension of time.
- ☒ Applicants petition for an extension of time, the fees for which are set out in 37 C.F.R. § 1.17(a), for the total number of months checked below:

<u>Total Months Requested</u>	<u>Fee for Extension</u>	<u>[Fee for Small Entity]</u>
<input type="checkbox"/> one month	\$ 110.00	\$ 55.00
<input type="checkbox"/> two months	\$ 400.00	\$ 200.00
<input checked="" type="checkbox"/> three months	\$ 920.00	\$ 460.00
<input type="checkbox"/> four months	\$ 1,440.00	\$ 720.00

Extension of time fee due with this request: \$460.00 (small entity).

If an additional extension of time is required, please consider this a Petition therefor.

- ☐ An extension for _____ months has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.

4. Fee Calculation (37 C.F.R. §1.16)

CLAIMS AS AMENDED						
	Claims Remaining After Amendment		Highest No. Previously Paid	Present Extra	at Rate of	Total Fees
Total Claims (37 C.F.R. §1.16(c))	45	minus	41	4	x \$18 each=	+ \$ 72.00
Independent Claims (37 C.F.R. §1.16(b))	12	minus	8	4	x \$84 each=	+ \$336.00
[] First presentation of Multiple dependent claim(s)					\$280.00	+ \$0.00
SUB-TOTAL =						\$408.00
Reduction by ½ for filing by a small entity						- \$204.00
TOTAL FEE =						\$204.00

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5. Fee Payment**Official**

- ☐ No fee is to be paid at this time.
- ☒ The Commissioner is hereby authorized to charge the amount of \$204.00 for a three-month extension of time fee to Deposit Account No. 50-0310.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, including fees due under 37 C.F.R. §§ 1.16 and 1.17, or credit any overpayment to Deposit Account 50-0310.

Respectfully submitted,

MORGAN, LEWIS & BOCKIUS LLP

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FEB 28 2002

Dated: February 28, 2002

By: 

James L. Reed

Registration No. 43,877

Richard S. Meyer

Registration No. 32,541

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PAF/kya